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**MS AF**  
REPLY UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2623

IN THE U. S. PATENT AND TRADEMARK OFFICE

Applicant:	Sadahiko HINOUE, et al.	Conf.:	6242
Appl. No.:	09/517,163	Group:	2623
Filed:	April 5, 2000	Examiner:	R. HESSELTINE
For:	AUTHENTICATION APPARATUS USING A DISPLAY/FINGERPRINT READER (AS AMENDED)		

**REPLY UNDER 37 C.F.R. § 1.116**

**MS AF**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

July 6, 2004

Sir:

In response to the Office Action dated April 6, 2004, the following remarks are respectfully submitted in connection with the above-identified application as follows:

Remarks/Arguments begin on page 2 of this paper.

P.O. Box 747  
Falls Church, Virginia 22040-0747  
Phone: (703) 205-8000  
Fax: (703) 205-8050  
(703) 698-8590 (GIV)

**Birch, Stewart, Kolasch & Birch, LLP**

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To:	Examiner Hesseltine (Group 2623)	From:	Terrell C. Birch
Fax:	703-872-9306	Date:	July 6, 2004
Phone:	703-306-4069	Pages:	12 (Including cover sheet)
Your Ref.:	Appl. No.: 09/517,163	Our Ref.:	1247-0424P
Confirmation No.: 6242			
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**Comments:**

MS AF  
REPLY UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2623

PATENT  
1247-0424P

**IN THE U.S. PATENT AND TRADEMARK OFFICE**

Applicant: Sadahiko HINOUE et al. Conf.: 6242  
 Appl. No.: 09/517,163 Group: 2623  
 Filed: April 5, 2000. Examiner: R. Hesseltine  
 For: AUTHENTICATION APPARATUS USING A  
 DISPLAY/FINGERPRINT READER (AS AMENDED)

**LARGE ENTITY TRANSMITTAL FORM**  
**FOR REPLY AFTER FINAL UNDER 37 C.F.R. § 1.116**

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

July 6, 2004

Sir:

Transmitted herewith is an amendment in the above-identified application.

- The enclosed document is being transmitted via the Certificate of Mailing provisions of 37 C.F.R. § 1.8.  
 The enclosed document is being transmitted via facsimile.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR			PRESENT EXTRA	RATE	ADDITIONAL FEE
<b>TOTAL</b>	15	-	20	=	0	\$ 18	\$0.00
<b>INDEPENDENT</b>	1	-	3	=	0	\$ 86	\$0.00
<input type="checkbox"/> FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM						\$290	\$0.00
						<b>TOTAL</b>	<b>\$0.00</b>

App. No. 09/517,163

- Petition for ( ) month(s) extension of time pursuant to 37 C.F.R. §§ 1.17 and 1.136(a). \$0.00 for the extension of time.

No fee is required.

Check(s) in the amount of \$0.00 is(are) enclosed.

Please charge Deposit Account No. 02-2448 in the amount of \$0.00. This form is submitted in triplicate.

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. §§1.16 or 1.17; particularly, extension of time fees.

Respectfully submitted,

BIRCH, STEWART, KOLASCH & BIRCH, LLP

By Clemie Green #2927 /  
Terrell C. Birch, #19,382

*RWD*  
TCB/RWD/mag  
1247-0424P

P.O. Box 747  
Falls Church, VA 22040-0747  
(703) 205-8000

**Attachment(s)**

(Rev. 02/08/2004)

Certificate of Transmission  
I hereby Certify that this correspondence is being  
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On July 6, 2004  
Melissa A. Golden  
Name or printed name of person signing certificate